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Date of Deposit June 10, 1998 I hereby certify that this paper or fee is being deposited with	
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1.10 on the date indicated above and is addressed to: Box PATENT APPLICATION, Assistant	
Commissioner for Patents, Washington, D.C. 20221.	
Bernardo Caycedo	
(Typed or printed name of person mailing paper or fee)	
Pate	nt
Attorney's Docket No. <u>031201-00</u>	<u>)9</u>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

UTILITY PATENT APPLICATION TRANSMITTAL LETTER

BOX PATENT APPLICATION

Assistant Commissioner for Patents Washington, D.C. 20231

Sir:

Enclosed for filing is the utility patent application of <u>Michael D. Laufer</u> for <u>METHOD</u> <u>AND APPARATUS FOR TREATING SMOOTH MUSCLES IN THE WALLS OF BODY CONDUITS</u>.

Also enclosed are:

[X] 4 sheet(s) of [] formal [X] informal drawing(s);

[X] Other: <u>Return Postcards</u>.

The declaration of the inventor(s) [X] also is enclosed.

The filing fee has been calculated as follows:

CLAIMS					
	NO. OF CLAIMS		EXTRA CLAIMS	RATE	FEE
Basic Application Fee					
Total Claims	49	MINUS 20 =	29	x \$22.00	\$638.00
Independent Claims	9	MINUS 3 =	6	x \$82.00	\$492.00
If multiple depende	ent claims are pi	resented, add \$270.00			
Total Application Fee					
If verified Statement claiming small entity status is enclosed, subtract 50% of Total Application Fee					
Add Assignment R	ecording Fee of	\$40.00 if Assignment	document is end	closed	

[X] A check in the amount of $\frac{1.920.00}{1.920.00}$ is enclosed for the fee due.

Please address all correspondence concerning the present application to:

Robert E. Krebs Burns, Doane, Swecker & Mathis, L.L.P. P.O. Box 1404 Alexandria, Virginia 22313-1404.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in triplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: June 10, 1998

Cindy A. Cherichetti Registration No. 38,699

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